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62658 7590 10/01/2010  MERCHANT & GOULD  SCIENTIFIC ATLANTA, A CISCO COMPANY  P.O. BOX 2903  MINNEAPOLIS, MN 55402-0903				Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
				Merri D. Cruz			(Depositor's name)
		/Merri D. Cruz/ December 3, 2010				(Signature)	
					**************************************	(Date)	
APPLICATION NO.	CATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTO	RNEY DOCKET NO.	CONFIRMATION NO.
10/712,655	55 11/13/2003		Altan J. Stalker		60374	1.0192US01/968265	8962
TITLE OF INVENTION: STATE-BASED MEMORY UNLOADING							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID	ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonpiovisional	МО	\$1510	\$300	St	)	\$1810	01/03/2011
EXAM	INER	ART UNIT	CLASS-SUBCLASS				
ALSIP, MICHAEL		2186	711-159000				AND CONTROL OF THE CO
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🔲 Corporation or other private group entity 🛄 Government							
pewer.	are submitted:  No small entity discount  of Copies	<ul> <li>4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)</li> <li>A check is enclosed.</li> <li>Payment by credit card. Form PTO-2038 is attached.</li> <li>The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 13-2725 (enclose an extra copy of this form).</li> </ul>					
5. Change in Entity Sta	tus (from status indicate	d above)	F	AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA			
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status: See 37 CFR 1.27(g)(2).  NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in							
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Authorized Signature /D. Kent Stier/				Date	Decembe	er 3, 2010	nanananananananananan vyyse = 4 si 854
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